

**South Carolina Department of Disabilities & Special Needs**  
**Facility-Based Adult Day Standards**

**Effective January 2005**

**General**

Facility-Based Adult Day Services include Day Habilitation and/or Prevocational services directed towards the improvement in skills necessary for the consumer to function with as much self-determination and independence as possible; and/or the prevention or deceleration of regression of the consumer's current functional status.

**Section 1; Personnel**

- A. Each facility will have a director who, prior to employment, meets the following qualifications:
  - 1). Is at least twenty-one years of age;
  - 2). Has at least a baccalaureate degree from an accredited college or university in the human services and two year's experience in administration or supervision in the human services field; and,
  - 3). Have reference from past employment.
  
- B. Each facility will have direct care staff that meet the following qualifications prior to employment:
  - 1). Are at least eighteen years of age;
  - 2). Have a valid high school diploma or its certified equivalent; and,
  - 3). Have references from past employment if the person has a work history.
  
- C. All staff will meet the following qualifications prior to employment:

- 1). Have SLED, SLED Sexual Offender, & DSS Central Registry of Child Abuse & Neglect checks that shows no record of Physical abuse; Emotional, mental or psychological abuse; Verbal abuse; Threatened abuse; Sexual abuse; Neglect; and/or Exploitation to children or disabled adults.
  - To process DSS Child Abuse & Neglect Central Registry checks, mail DSS FORM-3072 to: DSS Division of Human Services, Room 507, 1535 Confederate Av. Columbia, SC 29202-1520. Phone 803-898-7318 or fax 803-898-7641.
  - To process a SLED criminal background check or SLED Sex Offender Registry check, telephone 803-737-9000, or reference:  
<http://www.sled.state.sc.us/>
  - Checks are conducted within at least six (6) months prior to providing services, and every five years thereafter.
  - Individuals who has not been a resident of South Carolina for the last 10 consecutive years, must obtain a state law enforcement check from the state(s) in which they previously resided prior to providing day supports.
- 2). Be free from tuberculosis and comply with DDSN Policy [603-06-DD](#) Guidelines for Screening for Tuberculosis;
- 3). Be capable of aiding in the activities of daily living of each customer they are responsible for;
- 4). Have a valid driver's license if duties require transportation of customers; and
- 5). Must receive initial and ongoing training as outlined in DDSN Policy [567-03-DD](#). Documentation of in-service training must be maintained which reflects the

program content, name and title of presenter, length of training, date of training and names of staff who attended and passed.

## **Section 2; Customer/Staff Ratios – Supervision of Customers**

- A. A minimum customer/staff ratio of 10:1 must be maintained in each program areas, classroom, etc., at all times. Increased staff/customer ratios are based on individual needs of customers that results in a sufficient number of staff to implement the customer's plan of care and to respond to emergencies.
  - Customers do not supervise or care for other customers.
- B. A designated responsible staff member must be present and in charge at all times when customers are present. The staff person in charge must know how to contact the Day Director.
- C. Unless as specified in the customers' plans, customers will not be left without supervision.
- D. Each facility will have provisions for alternate coverage for staff persons who are absent.
- E. Direct care staff must be capable of following the customer's plan of service with minimal supervision, and demonstrate competency in required training, including any special techniques, procedures, equipment required to adequately provide services for the customer prior to assuming responsibility.

## **Section 3; Customer Protections**

- A. The customer (or the customer's legal representative) must be allowed to choose and participate in the type and amount of day support options they are eligible for as well as the provider(s) of day supports.

- B. Staff advocate for the customer to insure the customer's constitutional, civil and human rights are protected. Reference DDSN Policy [535-11-DD](#) Internal Grievance Appeal Procedures for Applicants and Service Recipients; DDSN Policy [535-08-DD](#) Customer Concerns/Complaints Reporting Procedures, and DDSN Policy [535-02-DD](#) Human Rights Committee.
- C. Each customer is free from Physical abuse; Emotional, mental or psychological abuse; Verbal abuse; Threatened abuse; Sexual abuse; Neglect; and/or Exploitation.
- D. Incidents of abuse (or allegations or suspected abuse) are reported and investigated as required by DDSN Policy [534-02-DD](#), and [534-01-DD](#). Reference DDSN Dashboard Indicators and DDSN Guidelines for Determining Trends in Unfavorable Customer Events.
- E. Any unusual, unfavorable occurrence that is: a) not consistent with routine operations; b) has harmful or otherwise negative effects involving people with disabilities, employees, or property; and c) occurs during the provision of day supports (e.g., "Critical incident") is reported as required by DDSN Policy [100-09-DD](#). Reference DDSN Dashboard Indicators and DDSN Guidelines for Determining Trends in Unfavorable Customer Events.
- F. Prior to any fee for service charged to the consumer, the facility obtains a signed agreement between the facility and the customer (or the customer's legal representative) stating the amount of fees for listed services.
- G. Customers are remunerated for work performed in accordance with the U.S. Department of Labor Wage and Hour Regulations and the Fair Labor Standards Act as referenced at: [www.dol.gov/dol/allcfr/ESA/Title\\_29/Part\\_525/toc.htm](http://www.dol.gov/dol/allcfr/ESA/Title_29/Part_525/toc.htm). For more information contact the US Dept. of Labor at: (312) 596-7200 or 596-7195.

#### **Section 4; Facility**

- H. Size – Each facility will have a minimum of fifty (50) square feet of program space per participant.
- I. Sanitation – A facility that prepares and serves, or processes food for human consumption, must pass a sanitation inspection conducted by their county Department of Health & Environmental Control Office prior to the facility being licensed; and annually thereafter. The facility must maintain the current permit issued by DHEC. Reference DHEC Regulation R61-25 at: <http://www.scdhec.net/>
- J. Fire Safety:
  - 1). The facility must pass an approved fire safety inspection completed by the State Fire Marshall:
    - i. Prior to the center being licensed;
    - ii. Annually; and,
    - iii. After major renovations

A request for a fire safety inspection should be made at least sixty (60) days in advance by using the following protocol: Step 1: Go to [www.lfr.state.sc.us/fmarshal/](http://www.lfr.state.sc.us/fmarshal/); Step 2. Select "Interagency Online Inspection Request Form"; Step 3. Enter password "america" in small caps; Step 4. Select "Request for Inspection – Work Camp"; Step 5. Fill out all sections of the request; Step 6. Submit the request. For additional guidance, please contact the Senior Deputy Fire Marshal, at (803) 896-9880.

Reports of all inspections must be maintained.

- 2). Each facility must comply with State Fire Marshal Regulation SCRR-71-8300 at all times.
- 3). Fire drills will be held at least once each quarter under various conditions (ex. morning, afternoon, when egress is blocked and an alternative exit must be used, etc.). Documentation of each drill should be maintained to denote the time and date of the drill; names of staff/consumers who participated; the total time required for evacuation; the exit used; any problems noted; and the name of staff

conducting the drill. Customers must be capable of self evacuation within three minutes of an alarm. When evacuations times are above three (3) minutes, documentation must denote corrective action until evacuation times are below 3 minutes;

- 4). Passageways will be free of obstructions at all times.

#### Electrical System Inspection:

- 1). The facility must pass a safety check of electrical systems by a licensed electrician:
  - i. Prior to the center being licensed;
  - ii. After any renovation or expansion; and,
  - iii. The addition of any major electrical appliance or equipment.

Licensed electrical inspectors/companies can be referenced at:

<http://lookup.llronline.com/index.asp> select for "Residential Builders", then under "license type" select "Specialty"; or select for "Contractors", then under "license type" select "Electrical". For additional information contact the SC Dept. of Labor Licensing & Regulations at 803-896-4464.

- 2). Reports of all inspections must be maintained.

#### K. Heating and Air Conditioning

- 1). The heating, air conditioning, and ventilation system will be approved by a licensed HVAC contractor:
  - i. Prior the center being licensed; and,
  - ii. Annually.

Licensed HVAC inspectors/companies can be referenced at:  
<http://lookup.llronline.com/index.asp> select for "Residential Builders", then under "license type" select "Specialty"; or select for "Contractors", then under "license type" select "Electrical". For additional information contact the SC Dept. of Labor Licensing & Regulations at 803-896-4464.

- 2). Reports of all HVAC inspections will be maintained.
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- L. The facility and grounds must be in good repair, safe, and free of hazards.
  - M. The facility and grounds must be barrier-free and accessible to customers
  - N. The facility must comply with applicable Occupational Safety and Health Administration regulations. Reference Occupational Safety and Health Program at: <http://www.llr.state.sc.us/osha.asp> (General Industry and Fire Service Checklist), and also <http://www.cdc.gov/niosh/homepage.html>
  - O. All cleaning equipment supplies, insecticides, etc., shall be in a locked cabinet or area not accessible to unauthorized persons.
  - P. Each facility must have an operable non-coin operated telephone. Numbers of the following shall be posted by the telephone (fire; police; ambulance; poison control center; or a single emergency number such as 911).
  - Q. The provider develops and implements a Disaster Preparedness Plan as required by DDSN Policy [100-25-DD](#). The plan includes how: staffing, transportation; and shelter will be provided in the event of a disaster (ex. Hurricane; Thunder Storm; Tornado; Flood; Forest Fire; Dam Failure; Nuclear Accident; Snow/Ice Storm; Earthquake; etc.). The Provider follows the plan as specified.
  - R. All furniture, equipment, and material will be:
    - 1). Appropriate to the ages of the customers in the program; and,

- 2). In sufficient quantity and variety to meet the needs of the customers.

## **Section 5; Transportation**

- A. If the program operates a transportation system, vehicles used for the transportation of customers will ensure safety for the passengers.
- B. Vehicles will:
  - 1). Be inspected daily using a checklist;
  - 2). Be properly maintained and record of maintenances recorded;
  - 3). Have a first aid kit which is replenished after each used and checked periodically for completeness; and,
  - 4). Have a fire extinguisher which is in good working order and accessible to the driver.

## **Section 6; Medical Care**

- A. Customers must be free from tuberculosis and comply with DDSN Policy [603-06-DD Guidelines for Screening for Tuberculosis](#);
- B. Any evidence of illness or injury will be documented and action will be taken to obtain necessary medical treatment of the customer.
- C. A plan for emergency medical services will be developed to meet each customer's needs the plan will include.
  - 1). The physician to be notified;
  - 2). The means of transportation for emergency medical care; and,
  - 3). Permission from the customer or his/her parent or legal guardian authorizing such care should an emergency arise.
- D. Each facility must have a standard, readily accessible first-aid kit (to include a basic first-aid reference guide), well stocked for the total number of customers served.
- E. Medications must be labeled with the name of the drug; the customer's name; the directions for use; expiration date, and the prescribing physician's name), and stored



under “proper conditions” (i.e. sanitation, temperature, light, humidity, and not accessible to unauthorized persons).

- F. Outdated medications, medication containers with illegible or missing labels and those discontinued are not used or stored in the center.
- G. For customers not independent in self-administration of medication/treatments, unlicensed staff may administer medications and/or medical treatments as specified within DDSN Policy [603-13-DD Certified Medication Technician](#), and when authorized by the customer (or the customer’s legal representative).
- H. For customers not independent in self-administration of medication/treatments, a medication/treatment log must be maintained by staff to denote: The name of medication or the type of treatment given; Name of staff administering the medication/treatment; Date and Time given; Dose (ex. milligrams and number of tablets).
- I. Procedures involving death or impending death of customers are followed as outlined in DDSN Policy [505-02-DD](#). If the death is: a) accidental; b) of a suspicious nature; or c) law enforcement is involved, then the death is considered a “critical incident” and will be subject to the reporting requirements of DDSN Policy [100-09-DD, Reporting of Critical Incidents](#).

## **Section 7; Evaluations/Planning**

- A. Within 20 business days after the referral is made, and annually (e.g., within 365 days) thereafter, the Day Director must ensure that a Day Service & Treatment Plan is developed that identifies: goal(s) the customer desires to achieve; objective(s) for each goal identified; and essential information to maintain the customer’s health, safety and welfare when working with the customer.
  - The DDSN Facility-Based Adult Day Service & Treatment Plan, or a form chosen by the provider and approved by DDSN, must be used.

- The plan is based on a comprehensive functional assessments identifies the customer's strengths, needs, preferences, in relation to stated goals and objectives.
  
- At a minimum, participation in the plan development includes the customer (or the customer's legal representative) and the Day Director (or designee). The opportunity for participation should be made available by inviting customer (or the customer's legal representative) to meetings, scheduling meetings at times and locations that will facilitate their participation, by soliciting input prior to the actual meeting if attendance is not possible, or by allowing participation in the meeting by phone or other means. The requirement is that the opportunity be afforded, not that participation occurs. If participation is unobtainable, then, in order for services to continue, planning should occur without their participation. Regardless of their participation, approval of the planning decision by the customer (or the customer's legal representative) must be obtained prior to the implementation of the decision. That means that the decision is shared with the customer (or the customer's legal representative) for their approval before any non-emergency decision is implemented. Records must clearly reflect both the efforts to afford the customer (or the customer's legal representative) the opportunity to participate in planning and the customer (or the customer's legal representative) approval of the plan prior to implementation.
  
- Accountability levels must be assigned as directed in DDSN Policy [510-01-DD](#).

- NOTE: For customers who receive Level I Service Coordination, an Adult Day Report for Single Plan Development must be completed by the Provider and submitted to the customer's Service Coordinator no later than fifteen (15) business days prior to the customer's annual single plan review date, or as requested by the customer's service coordinator.

- B. As soon as the plan is formulated, the customer must receive supports consisting of needed interventions and services in sufficient number and frequency to support the achievement of the plan.

Based on goals and interventions within the customer's plan, direct care staff provide:

- Formal skills training whereby data is taken to reach criterion based objectives;
- Generic learning opportunities to promote development of assessed needs;
- and
- Care and supervision interventions to promote optimal health and safety.

The customer's plan must be implemented:

- As specified;
- When a need arises, or opportunities are present; and
- In sufficient intensity and frequency to support the achievement of goals/objectives

Objectives must be:

1. Written in a single behavioral outcome (e.g., for each discrete skill to be learned, a separate objective is assigned. For example, "Mary will cross the street and locate community resources" are two separate skills and, therefore, must be stated in two separate objectives. For example, "Mary will cross the street" and "Mary will locate community resources").
2. Assigned a projected completion date (e.g., The date is based on when the objective is likely to be completed based the customer's rate of learning. This date is used as a trigger to evaluate whether or not the customer's progress is sufficient to warrant a revision to the objective).
3. Written in terms that provide measurable indices of performance (e.g., The objective is stated in a manner, which enables staff to clearly identify the target behavior when it is being displayed and how to determine successful achievement of the objective. For example, "Mary will independently locate 4 of 7 community resources).
4. Assigned a schedule for use (e.g., Provides clear directions to any staff working with the customer on how to implement the training objective. For example, if a customer is learning to identify coins, the training program methodology must specify for the staff how the training is to be conducted (i.e. present a penny, nickel, dime and quarter and ask the customer to name the \_\_\_\_; present only one coin at a time and ask the customer to name the coin that is presented; present two different coins at a time and ask the customer to name one of the two presented and continue until all coins have been presented and named in this manner). Additionally, this methodology must specify any other information that would be important and would affect the training such as hearing loss, visual impairment, limited use of extremities, etc.).
5. Schedule (e.g., The training program provides clear directions to any staff working with the customer about when the objective must be implemented).

6. Assigned a type of data and frequency of data collection necessary to be able to assess progress toward the desired objectives (e.g., The training program provides clear directions to any staff working with the customer about the type and frequency of data to be recorded. The data collection system is directly related to the outcome stated in the objective. For example, if the criteria in the customer's objective specified some behavior to be measured by "accuracy," or "successes out of opportunities," then it would not be acceptable for the prescribed data collection method to record "level of prompt." Examples of a few data collection systems include, but are not limited to, level of prompt, successful trials completed out of opportunities given, frequency counts, frequency sampling, etc. Staff must collect data with enough frequency and content to measure the customer's performance toward the targeted objective).
- C. Each plan will be monitored by the Day Director (or designee) as needed, but at least monthly (e.g., progress notes) to ensure the customer is benefiting from day support services (e.g., progress on objectives, effectiveness of care and supervision supports; and customer satisfaction with day support services they receive).
- D. Accurate, systematic data serves as the basis for necessary additions and/or changes to the plan.
- Additions and/or changes are made to the plan when the customer: meets an objective; is not beneficial after sufficient and well documented efforts have been made to address the concern; and/or is unsatisfied with the service.
  - For customers who receive Level II Service Coordination, the customer (or the customer's legal representative) and Day Director (or designee) must

approve additions and/or change to objectives and/or goals prior to implementing the change.

- For customers who receive Level I Service Coordination, the customer (or the customer's legal representative) and their Service Coordinator must approve additions and/or changes to goals prior to implementing the change. Note: Additions and/or changes to objectives can be made without having to contact the customer's service coordinator, as long as the addition and/or change coincides with a prioritized goal identified within the Single Plan

E. Interventions to address inappropriate customer behavior are developed, implemented and monitored according to DDSN Policy [600-05-DD Behavior Support Plans](#).

F. Reporting activities must:

1. Comply with DDSN Finance Manual: Sections 10.2. The expected number of hours of service for each individual is 5.5 per day excluding transportation. Data must be maintained to support services provided for each day the customer is identified on the DDSN attendance record.

2. Meet the definition of the service:

- Day Habilitation (e.g., assistance with acquisition, retention, or improvement of self-help, socialization and adaptive skills, which takes place in a non-residential setting, separate from the home and facility in which the individual resides. Services shall normally be furnished 4 or more hours per day on a regularly scheduled basis, for 1 or more days per week unless provided as an adjunct to other day activities included in an individual's plan. Day habilitation services shall focus on enabling the individual to attain or maintain his or her maximum functional level and shall be coordinated with any physical, occupational, or speech therapies

listed in the plan. In addition, day habilitation services may serve to reinforce skills or lessons taught in school, therapy, or other settings).

- Prevocational Services (e.g., Aimed at preparing an individual for paid or unpaid employment, but are not job task oriented and are not directed at teaching job specific skills. Activities included in this service are directed at teaching habilitative goals such as attention span or motor skills. Services include teaching concepts such as compliance, attendance, endurance, task completion, problem solving and safety. All prevocational services will be reflected in the recipient's plan).

- G. The facility must comply with applicable DDSN contracts, policies, procedures, and standards (ex. Administrative Agency Standards (Series 100- 200); Provider Contract for Person Centered Services & Supports Through a Capitated Model; MR/RD or HASCI Medicaid Wavier Manual; Rehabilitation Supports Manual; DDSN/Provider Contract for Person Centered Services & Supports for Individual & Family Support (Non-Capitated) Services, etc.).

## **Section 8; Records**

- A. All programmatic records, supporting documents, statistical records and other records of customers relating to care must be retained for a period of six years after the expiration of the DDSN/Provider Contract, and must comply with:

- DDSN Policy [167-06-DD Confidentiality of Customer Records](#)
- DDSN Policy [368-01-DD Records Management](#)
- The Health Insurance Portability & Accountability Act of 1996, Public Law 104-191

- B. All entries into customer records will be legible and dated and signed by the person making the entry.
- C. If symbols or abbreviations are used in a customer's record, an explanatory legend must be provided.
- D. The facility will maintain a file for each individual receiving services that will included at a minimum:
- Assessment information
  - Day Service & Treatment Report (Consumers receiving Level I Service Coordination – Only)
  - Day Service & Treatment Plan
  - Single Plan (Consumers receiving Level I Service Coordination – Only)
  - Monthly progress notes
  - Data collection
  - Current demographic information
  - Contacts made with family members, etc.
  - Wage and hour determinations (Consumers remunerated for work performed – Only)
  - Behavior Support Plans (when applicable)
  - Critical incident reports (when applicable)